

NESHAP for Gasoline Distribution Bulk Terminals, Bulk Plants, and Pipeline Facilities

State of North Carolina

INITIAL NOTIFICATION FORM

FACILITY INFORMATION:

Facility Name: _____ Facility ID: _____

Facility Owner/Operator: _____

Facility Street Address: _____

Please note any corrections to the above information, if necessary.

APPLICABLE STANDARD: Gasoline Distribution Bulk Terminals, Bulk Plants, and Pipeline Facilities (Subpart BBBBBB)

Facility Compliance Date: January 10, 2011 (existing sources) OR upon startup (new sources)

Is your facility a major source of HAPs? (check one)

☐ Yes. My facility is a major source of HAPs.

☐ No. My facility is an area source of HAPs

Note: A major source is a facility that emits or had the potential to emit greater than 10 tons per year of any one HAP or 25 tons per year of multiple HAPs. All other sources are area sources.

Is your facility subject to Subpart BBBBBB? (check one)

☐ Yes

☐ No (Please explain) _____

SOURCE DESCRIPTION

Briefly describe the source. (section 63.9(b)(2)(iv))

Provide (at least) information on the number and capacity of gasoline storage tanks and the average monthly gasoline throughput

SIGNATURE

Signature of Responsible Person or Company Official:

Date:

(Print): _____
Title:

Return this form BOTH the NC Division of Air Quality and the US Environmental Protection Agency at the following addresses:

Teresa Colón
NC Division of Air Quality
1641 Mail Service Center
Raleigh, NC 27699-1641

Gregg Worley
Chief Air Toxics Monitoring Branch
U.S. EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303-3104

It is recommended that this form be sent by certified mail so that you will have a record that this form was submitted to the regulatory authority.